

APPLICATION DATA SHEET

Electronic Version v14
Stylesheet Version v14.0

Title of Invention	STENT CRIMPER	
Application Type:	regular, utility	
Attorney Docket Number:	S63.2-11395-US01	
Correspondence address:		
Customer Number:	490	*490*
Inventor Information:		
<u>Inventor 1:</u>		
Applicant Authority Type:	Inventor	
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State of Residence:	MN	
Country of Residence:	US	
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State of Mailing Address:	MN	
Postal Code of Mailing Address:	55421	
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Attorney Information:

Name	Registration Number
Ms. Lisa L. Ryan-Lindquist	43071

Assignee 1:

Organization Name: Scimed Life Systems, Inc.

Address-1 of Mailing Address: One Scimed Place

Address-2 of Mailing Address:

City of Mailing Address: Maple Grove

State of Mailing Address: MN

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